



IPW

## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application No.	10/696,142
		Filing Date	October 28, 2003
		First Named Inventor	Ja Won Seo
		Art Unit	2613
		Examiner Name	Le, Thi Q
Total Number of Pages in This Submission	8	Attorney Docket Number	2013P112

### ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached  <input checked="" type="checkbox"/> Amendment / Reply  <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> PTO/SB/08  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
	<div style="border: 1px solid black; padding: 5px; height: 60px; vertical-align: top;">           return postcard         </div>	

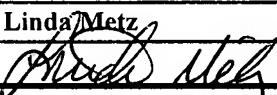
Remarks

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Eric S. Hyman, Reg. No. 30,139  BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	5/10/07

### CERTIFICATE OF MAILING/TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Typed or printed name	Linda Metz
Signature	
Date	June 8, 2007



**EE TRANSMITTAL**  
for FY 2006

*Patent fees are subject to annual revision.*

 <b>FEETRANSMITTAL</b> <b>for FY 2006</b>		<i>Complete if Known</i>	
<i>Patent fees are subject to annual revision.</i>		Application Number	10/696,142
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		Filing Date	October 28, 2003
		First Named Inventor	Ja Won Seo
		Examiner Name	Le, Thi Q
		Art Unit	2613
		Attorney Docket No.	2013P112
<b>TOTAL AMOUNT OF PAYMENT</b>		(\$)	0.00

**METHOD OF PAYMENT** (check all that apply)

Check  Credit card  Money Order  None  Other (please identify): \_\_\_\_\_

Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below

Charge fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayment of fee(s) during the pendency of this application.

Credit any overpayments

Any concurrent or future reply that requires a petition for extension of time should be treated as incorporating an appropriate petition for extension of time and all required fees should be charged.

## FEES CALCULATION

## 1. EXTRA CLAIM FEES

EXTRA CLAIM FEES		Extra Claims	Fee from below	Fee Paid
Total Claims	3	- 20 <sup>**</sup> =	0	X 25.00 = \$0.00
Independent Claims	1	- 3 <sup>**</sup> =	0	X 100.00 = \$0.00
Multiple Dependent				=

Large Entity		Small Entity		Fee Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
1202	50	2202	25	Claims in excess of 20
1201	200	2201	100	Independent claims in excess of 3
1203	360	2203	180	Multiple Dependent claim, if not paid
1204	790	2204	395	**Reissue independent claims over original patent
1205	300	2205	150	**Reissue claims in excess of 20 and over original patent

*\*\*or number previously paid, if greater. For Reissues, see below*

## 2 ADDITIONAL FEES

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Large Entity		Small Entity		Fee Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
1051	130	2051	65	Surcharge - late filing fee or oath
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.
2063	130	2063	130	Non-English specification
1251	120	2251	60	Extension for reply within first month
1252	450	2252	225	Extension for reply within second month
1253	1,020	2253	510	Extension for reply within third month
1254	1,590	2254	795	Extension for reply within fourth month
1255	2,160	2255	1,080	Extension for reply within fifth month
1401	500	2401	250	Notice of Appeal
1402	500	2402	250	Filing a brief in support of an appeal
1403	1,000	2403	500	Request for oral hearing
1451	1,510	2451	1,510	Petition to institute a public use proceeding
1460	130	2460	130	Petitions to the Commissioner
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)
1806	180	1806	180	Submission of Information Disclosure Stmt
1809	790	1809	395	Filing a submission after final rejection (37 CFR § 1.129)
1810	790	2810	395	For each additional invention to be examined (37 CFR §

**Other fee (specify)**

**SUBTOTAL (2)**

6

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**SUBMITTED BY**

Complete (if applicable)

SUBMITTED BY		Complete (if applicable)		
Name (Print/Type)	Eric S. Hyman	Registration No. (Attorney/Agent)	30,139	Telephone
Signature			Date	5/3/07

Based on PTO/SB/17 (02-07) as modified by Blakely, Sokoloff, Taylor & Zafman (wlr) 02/26/2007.  
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Ja Won Seo et al.,

Application No: 10/696,142

Filing Date: 10/28/2003

For: **BURST MODE OPTICAL RECEIVER**

Examiner: Le, Thi Q

Art Unit: 2613

Confirmation No.: 5530

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

**AMENDMENT AND RESPONSE TO OFFICE ACTION**

In response to the Office Action mailed March 9, 2007, in connection with the above-referenced patent application, Applicant respectfully requests entry of the following amendments and requests reconsideration in view of the following remarks.